

1.) CORPORATION NAME:

DUE DATE: **3/31/2012**

**GMAC Insurance Management Corporation**

SCC ID NO: **F1854563**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

**AUTH IN VI**

**CORPORATION SERVICE COMPANY**

**Bank of America Center, 16th Floor**

**1111 East Main Street**

**RICHMOND, VA 23219**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	2,500

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DE**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 500 WEST FIFTH STREET

CITY/ST/ZIP: WINSTON-SALEM, NC 27101-

7.) DIRECTORS AND PRINCIPAL OFFICERS:

All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

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OFFICER

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DIRECTOR

NAME: LAWRENCE R. PENTIS  
TITLE: PRESIDENT  
ADDRESS: 500 WEST FIFTH STREET  
CITY/ST/ZIP/CO: WINSTON-SALEM, NC 27101-

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OFFICER

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DIRECTOR

NAME: MICHAEL KARFUNKEL  
TITLE: CHAIRMAN  
ADDRESS: 59 MAIDEN LANE  
23RD FLOOR  
CITY/ST/ZIP/CO: NEW YORK, NY 10038-

☐

OFFICER

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DIRECTOR

NAME: HARRY SCHLACHTER  
TITLE: DIRECTOR  
ADDRESS: 59 MAIDEN LANE  
CITY/ST/ZIP/CO: NEW YORK, NY 10038-

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OFFICER

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DIRECTOR

NAME: PETER A. RENDALL  
TITLE: TREASURER  
ADDRESS: 59 MAIDEN LANE  
CITY/ST/ZIP/CO: NEW YORK, NY 10038-

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OFFICER

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DIRECTOR

NAME: MICHAEL H. WEINER  
TITLE: CFO  
ADDRESS: 59 MAIDEN LANE  
CITY/ST/ZIP/CO: NEW YORK, NY 10038-

NAME:	JEFFREY A. WEISSMANN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	59 MAIDEN LANE		
CITY/ST/ZIP/CO:	NEW YORK, NY 10038-		
NAME:	HERBERT J. LEMMER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	59 MAIDEN LANE		
CITY/ST/ZIP/CO:	NEW YORK, NY 10038-		
NAME:	ROBERT M. KARFUNKEL	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	59 MAIDEN LANE		
CITY/ST/ZIP/CO:	NEW YORK, NY 10038-		
NAME:	BARRY S. KARFUNKEL	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	59 MAIDEN LANE		
CITY/ST/ZIP/CO:	NEW YORK, NY 10038-		
NAME:	DONALD DECARLO	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	59 MAIDEN LANE		
CITY/ST/ZIP/CO:	NEW YORK, NY 10038-		
NAME:	DONALD J. BOLAR	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	500 W. FIFTH STREET		
CITY/ST/ZIP/CO:	WINSTON-SALEM, NC 27101-		
NAME:	GEORGE H. HALL, JR.	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	500 WEST FIFTH STREET		
CITY/ST/ZIP/CO:	WINSTON-SALEM, NC 27101-		
NAME:	PRESTON SCOTT ECKMAN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	500 WEST FIFTH STREET		
CITY/ST/ZIP/CO:	WINSTON-SALEM, NC 27101-		
NAME:	BRENDA CASTELLANO	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP		
ADDRESS:	500 WEST FIFTH STREET		
CITY/ST/ZIP/CO:	WINSTON-SALEM, NC 27101-		
NAME:	JOHN E. DONAHUE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	COO		
ADDRESS:	500 WEST FIFTH STREET		
CITY/ST/ZIP/CO:	WINSTON-SALEM, NC 27101-		

NAME: VICKI L. LAMBERT TITLE: SVP, CCO, AS ADDRESS: 500 WEST FIFTH STREET CITY/ST/ZIP/CO: WINSTON-SALEM, NC 27101-	<input checked="checked" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: THOMAS E. NEWGARDEN TITLE: SVP ADDRESS: 59 MAIDEN LANE CITY/ST/ZIP/CO: NEW YORK, NY 10038-	<input checked="checked" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.	
/s/ HERBERT J. LEMMER SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	HERBERT J. LEMMER, ASST <u>SECRETARY</u> PRINTED NAME AND CORPORATE TITLE
<u>3/7/2012</u> DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.	